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## BIB DATA SHEET

CONFIRMATION NO. 6761

<b>SERIAL NUMBER</b> 10/787,486	<b>FILING or 371(c) DATE</b> 02/24/2004 <b>RULE</b>	<b>CLASS</b> 273	<b>GROUP ART UNIT</b> 3711	<b>ATTORNEY DOCKET NO.</b> SES 2539.1.1	
<b>APPLICANTS</b> Robert Levin, Florissant, MO; <b>** CONTINUING DATA *****</b> This application is a CON of 10/092,959 03/04/2002 ABN <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> 05/16/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /DOLORES R COLLINS/ Acknowledged Examiner's Signature		<input type="checkbox"/> Met after Allowance <b>STATE OR COUNTRY</b> MO	<b>SHEETS DRAWINGS</b> 1	<b>TOTAL CLAIMS</b> 6	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> GRACE J FISHEL 2200 WEST PORT PLAZA DRIVE SUITE 202 ST. LOUIS, MO 63146 UNITED STATES					
<b>TITLE</b> SESQUIPTM					
<b>FILING FEE RECEIVED</b> 385	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		